

CERTIFICATE OF OCCUPANCY CITY OF WAVELAND

that at the time of issuance, this structure was in compliance with the various ordinances of the City of Waveland regulating building construction or use. This Certificate is issued pursuant to the requirements of the 2012 International Codes Council certifying

Certificate #:1800051

Issued to: MIKE & MADELIN HARPER

Building Address: 142 VACATION LN

City, State, Zip: WAVELAND, MS 39576

Issued Date: 08-31-2018 Ex

Expires: End of occupancy

Occupancy Type: R-1 SFR HOME

Sprinkler System Required: NO

Special Conditions: NONE

Building Official

8-31-18

)ate

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATE

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY U					RANCE COMPANY USE		
A1. Building Owner Benfatti	g Owner's Name Policy Number:					ber:	
	eet Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number:						NAIC Number:
City Waveland		State ZIP Code Mississippi 39576					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 14 & S/E 25 feet of Lot 15, Holiday Hill Subdivision							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential							
A5. Latitude/Longi	tude: Lat. 30	-16-43	Long. 8	9-22-35	Horizontal Datun	n: NAD 1	1927 X NAD 1983
A6. Attach at least	2 photograph	ns of the building if the	Certific	cate is being used to	o obtain flood insura	ance.	
A7. Building Diagra	am Number	5					
A8. For a building	with a crawls	pace or enclosure(s):					
a) Square foo	tage of crawls	space or enclosure(s)	-	0 sq ft			
b) Number of	permanent flo	od openings in the cra	wispac	ce or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade0
c) Total net ar	ea of flood op	enings in A8.b0		sq in			
d) Engineered	flood opening	gs? ☐ Yes ☒ No)				
A9. For a building v	with an attach	ed garage:					
a) Square foot	a) Square footage of attached garage 0 sq ft						
b) Number of	permanent flo	od openings in the atta	ached (garage within 1.0 fo	ot above adjacent o	grade	0
c) Total net are	ea of flood op	enings in A9.b	0	sq in		- A	
		gs? ☐ Yes ☒ No	**	-			
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMA	TION	
B1. NFIP Communi City of Waveland 2	117	ommunity Number		B2. County Name Hancock County		B3. State Mississippi	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	E	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zoi	se Flood Elevation(s) ne AO, use Base and Depth)
28045C0344	D	10/16/2009		/2009	AE	20	Ju Bopuly
B10. Indicate the s	ource of the E	Base Flood Elevation (F	BFE) d	ata or base flood de	epth entered in Item	B9:	
☐ FIS Profile	X FIRM [Community Determ	ined [Other/Source:			
B11. Indicate eleva	tion datum us	sed for BFE in Item B9	: 🗌 N	GVD 1929 🗵 NA	.VD 1988 ☐ Oti	ner/Source:	
B12. Is the building	located in a	Coastal Barrier Resou	rces Sv	ystem (CBRS) area	or Otherwise Prote	cted Area (C	DPA)? ☐ Yes ☒ No
Designation D			BRS	□ ОРА		3200	
	-			_			

IMPORTANT: In these spaces, copy the corresponding information from Section 1.	tion A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Rout 142 Vacation Lane		Policy Number:
City State ZIP C	Code	Company NAIC Number
Waveland Mississippi 3957	6	
SECTION C - BUILDING ELEVATION INFORMATI	ION (SURVEY RE	EQUIRED)
C1. Building elevations are based on: Construction Drawings* Build *A new Elevation Certificate will be required when construction of the buildin	ling Under Constru ng is complete.	ction* X Finished Construction
C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BF Complete Items C2.a–h below according to the building diagram specified in	Item A7. In Puert	
Benchmark Utilized: GPS Derived Vertical Datum:		
Indicate elevation datum used for the elevations in items a) through h) below ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source:		
Datum used for building elevations must be the same as that used for the BF	-E.	Check the measurement used.
a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>26</u> . 4	X feet meters
b) Top of the next higher floor	36. 3	x feet meters
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	X feet meters
d) Attached garage (top of slab)	N/A	X feet meters
 e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) 	<u>25</u> . <u>7</u>	X feet meters
f) Lowest adjacent (finished) grade next to building (LAG)	<u>13</u> . 2	X feet meters
g) Highest adjacent (finished) grade next to building (HAG)	13.8	X feet meters
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>13</u> . <u>5</u>	feet meters
SECTION D - SURVEYOR, ENGINEER, OR ARCH	HITECT CERTIFIC	CATION
This certification is to be signed and sealed by a land surveyor, engineer, or archill certify that the information on this Certificate represents my best efforts to interpresent may be punishable by fine or imprisonment under 18 U.S. Code, Section	ret the data availal	law to certify elevation information. ble. I understand that any false
Were latitude and longitude in Section A provided by a licensed land surveyor?		
Certifier's Name License Number Jason P Chincihe P.E. 19732		AND PORT
Title	A	AND SED PROS
Project Manger	equitorium de la companya de la comp	CEN ENGINEER OF THE
Company Name James J Chiniche PA INC		ω Seal A
Address 412 Hwy 90 Suite 4		300
	ZIP Code 39520	MISSISS PROMINE
	Telephone (228) 467-6755	-
Copy all pages of this Elevation Certificate and all attachments for (1) community offic	cial, (2) insurance a	gent/company, and (3) building owner.
Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3 above is for information only & not to certify the build Map Section B4. Recommend verification of (BFE) by local building official. The f responsible for coordinating this certificate with contractor and/or building official a edge of asphalt at center of lot. EL: 12.7. Waveland free board = 1.0'. C2e is Medi	ling location. The land location is determined to the land land land land land land land land	base flood elevation (BFE) is per mined by graphic plotting, owner is a mag nail w/thru marker set in

IMPORTANT: In these spaces, copy the correspondent	onding information fr	om Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, 142 Vacation Lane	and/or Bldg. No.) or P	.O. Route and Box No.	Policy Number:
City Waveland	State Mississippi	ZIP Code 39576	Company NAIC Number
SECTION E – BUILDING FOR ZO	ELEVATION INFOR	MATION (SURVEY NO A (WITHOUT BFE)	T REQUIRED)
For Zones AO and A (without BFE), complete Items complete Sections A, B,and C. For Items E1–E4, us enter meters.	se natural grade, if ava	ilable. Check the measur	rement used. In Puerto Rico only,
 E1. Provide elevation information for the following a the highest adjacent grade (HAG) and the lowe a) Top of bottom floor (including basement, crawlspace, or enclosure) is 	and check the appropriest adjacent grade (LA	ate boxes to show wheth G).	
b) Top of bottom floor (including basement, crawlspace, or enclosure) is		leet met	
E2. For Building Diagrams 6–9 with permanent floo the next higher floor (elevation C2.b in the diagrams) of the building is	d openings provided in	Section A Items 8 and/o	
E3. Attached garage (top of slab) is		feet met	ers above or below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is		feet _ mete	ers above or below the HAG.
E5. Zone AO only: If no flood depth number is avail floodplain management ordinance? Yes			ccordance with the community's certify this information in Section G.
SECTION F - PROPERTY O	WNER (OR OWNER'S	S REPRESENTATIVE) C	ERTIFICATION
The property owner or owner's authorized represent community-issued BFE) or Zone AO must sign here.	ative who completes S	Sections A. B. and F for Z	one A (without a FEMA-issued or
Property Owner or Owner's Authorized Representati	ve's Name		
Address	City	y S	tate ZIP Code
Signature	Da	te T	elephone
Comments	Market and the second		
			Check here if attachments.

MPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US					
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Policy Number: 142 Vacation Lane					
City Waveland	State Mississippi	ZIP Code 39576	Company NAIC Number		
SECTION G - COMMUNITY INFORMATION (OPTIONAL)					
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.					
G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)					
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.					
G3. The following information (Items G4-	-G10) is provided for commun	ity floodplain manageme	ent purposes.		
G4. Permit Number	G5. Date Permit Issued		ate Certificate of ompliance/Occupancy Issued		
G7. This permit has been issued for:	New Construction Subst	antial Improvement			
G8. Elevation of as-built lowest floor (including of the building:	g basement)	feet	meters Datum		
G9. BFE or (in Zone AO) depth of flooding at	the building site:	feet	meters Datum		
G10. Community's design flood elevation:		feet	meters Datum		
Local Official's Name	Title				
Community Name	Telep	phone			
Signature	Date				
Comments (including type of equipment and loc	cation, per C2(e), if applicable)				
			Check here if attachments.		

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2018

IMPORTANT: In these spaces, c	opy the corresponding information	from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including 142 Vacation Lane	Apt., Unit, Suite, and/or Bldg. No.) o	r P.O. Route and Box No.	Policy Number:
City	State	ZIP Code	Company NAIC Number
Waveland	Mississippi	39576	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

Photo One Caption Front



Photo Tw

Photo Two Caption Rear

U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

	SECT	TION A - PROPERTY	INFOR	MATION		FOR INSUI	RANCE COMPANY USE
A1. Building Owner's Name Policy Number:						nber:	
Benfatti 2018-118							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 142 Vacation Lane							NAIC Number:
City State ZIP Code							
Waveland Mississippi 39576							
		nd Block Numbers, Tax oliday Hill Subdivision		l Number, Legal De	scription, etc.)		
A4. Building Use (e	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential						
A5. Latitude/Longitu	ıde: Lat. <u>30</u>	-16-43 l	ong. 8	9-22-35	Horizontal Datum	: NAD	1927 🛛 NAD 1983
A6. Attach at least 2	2 photograph	ns of the building if the	Certific	cate is being used to	o obtain flood insura	ince.	
A7. Building Diagrar	m Number	5					
A8. For a building w	ith a crawlsp	pace or enclosure(s):					
a) Square foota	age of crawls	pace or enclosure(s)		0 sqft			
b) Number of po	ermanent flo	od openings in the cra	wlspac	e or enclosure(s) w	ithin 1.0 foot above	adjacent gr	ade 0
		enings in A8.b 0		g in		10. 10 # 0.1 1 d. 10 10 10 10 10 10 10 10 10 10 10 10 10	
		gs? Yes 🗵 No		•			
			,				
A9. For a building wi		-					
a) Square foota	ge of attach	ed garage0		sq ft			
b) Number of pe	ermanent flo	od openings in the atta	ched g	garage within 1.0 foo	ot above adjacent g	rade	0
c) Total net area	a of flood op	enings in A9.b)	sq in			
d) Engineered f	lood opening	gs? Yes X No)				
	William The Control of the Control o						
	SEC	CTION B - FLOOD IN	SURA	NCE RATE MAP	(FIRM) INFORMA	TION	1
B1. NFIP Community City of Waveland 285		ommunity Number		B2. County Name Hancock County			B3. State Mississippi
	B5. Suffix	B6. FIRM Index		RM Panel	B8. Flood Zone(s)		se Flood Elevation(s)
Number	_	Date	R	fective/ evised Date		Floo	ne AO, use Base od Depth)
28045C0344	D	10/16/2009	10/16	/2009	AE	20	
		ase Flood Elevation (E			pth entered in Item	B9:	
B11. Indicate elevati	on datum us	ed for BFE in Item B9:	N	- GVD 1929 ⊠ NA	VD 1988	er/Source:	
D10 lotha huildin - I	opatod in -	Coastal Barrier Barrier	C	rotom (CDDC)	or Othonidae Deste	otod A ''	DDAY2 [V [N-
AVEY 01 Settle 705000		<u> </u>			OI Otherwise Prote	cied Area (C	OPA)? Tyes X No
Designation Da	ite:	C	BRS	☐ OPA			

IPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COMPANY US						
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.0 142 Vacation Lane	Policy Number:					
City State Waveland Mississippi	ZIP Code 39576	Company NAIC Number				
SECTION C – BUILDING ELEVATION INFO	RMATION (SURVEY RI	EQUIRED)				
SECTION C – BUILDING ELEVATION INFO C1. Building elevations are based on: Construction Drawings* *A new Elevation Certificate will be required when construction of the C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (Complete Items C2.a–h below according to the building diagram spe Benchmark Utilized: GPS Derived Vertical Didicate elevation datum used for the elevations in items a) through he NGVD 1929 NAVD 1988 Other/Source: Datum used for building elevations must be the same as that used for a) Top of bottom floor (including basement, crawlspace, or enclosured b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, include structural support SECTION D – SURVEYOR, ENGINEER, OF This certification is to be signed and sealed by a land surveyor, engineer, of a certify that the information on this Certificate represents my best efforts to statement may be punishable by fine or imprisonment under 18 U.S. Code Were latitude and longitude in Section A provided by a licensed land surveyor.	RMATION (SURVEY RI Building Under Constru- building is complete. with BFE), AR, AR/A, AR/ cified in Item A7. In Puert latum: NAVD88) below. In the BFE. In floor) 26, 4 N/A. N/A. N/A. N/A. N/A. N/A. N/A. 13, 2 13, 8 In grant Architect authorized by the interpret the data availate, Section 1001. Byor? X Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Check the measurement used. The provided in meters The provided in the provided				
Certifier's Name Jason P Chincihe P.E. 19732 Title Project Manger Company Name James J Chiniche PA INC Address 412 Hwy 90 Suite 2 City State	ZIP Code	SON P. CHINA SON PROPERTY OF THE PROPERTY OF MISSISSING AND MISSIS				
Bay St. Louis Mississippi	39520					
Signature Date 03/14/2018 Copy all pages of this Elevation Certificate and all attachments for (1) communications.	Telephone (228) 467-6755 nity official, (2) insurance a	agent/company, and (3) building owner.				
Comments (including type of equipment and location, per C2(e), if applicable NOTE: The description in A3 above is for information only & not to certify the Map Section B4. Recommend verification of (BFE) by local building official responsible for coordinating this certificate with contractor and/or building of edge of asphalt at center of lot. EL: 12.7. Waveland free board = 1.0'.	ole) ne building location. The I. The flood zone is deter	base flood elevation (BFE) is per mined by graphic plotting, owner is				

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

	And in concession of the last	And a substitute of the contract of the contra				THE REAL PROPERTY.	
	SECTION A - PROPERTY INFORMATION FOR INSURANCE COMPANY USE					NSURANCE COMPANY USE	
A1. Building Owner's Nam	A1. Building Owner's Name Michael S. & Madeline H. Harper Policy Number:						Number:
A2. Building Street Address 142 Vacation Lane	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number: 142 Vacation Lane						any NAIC Number:
City Waveland			State M	S ZIP C	ode 39576	-	
A3. Property Description (I Lot 14 & S/E 25 feet of Lot							
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL A5. Latitude/Longitude: Lat. 30°16'43.9" Long. 89°22'35.3" Horizontal Datum: NAD 1927 NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number N/A A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: a) Square footage of crawlspace or enclosure(s) sq ft a) Square footage of attached garage sq ft							
b) Number of perman or enclosure(s) with c) Total net area of fic d) Engineered flood o	ent flood opening hin 1.0 foot above ood openings in A	gs in the crawlspace e adjacent grade	sq ft	b		nt flood op adjacent d opening	penings in the attached garage grade
	SECT	TION B - FLOOD	INSURANCE I	RATE MAP	(FIRM) INFORMATION	ON	
B1. NFIP Community Name 285262	& Community N	lumber	B2. County Nan Hancock Count			B3. Sta Mississ	
B4. Map/Panel Number 28045C0344	B5. Suffix D	B6. FIRM Index I 10-16-09	Effectiv	FIRM Panel e/Revised Da 10-16-09	B8. Flood Zone(s) AE	B9.	Base Flood Elevation(s) (Zone AO, use base flood depth) 20'
B10. Indicate the source of t FIS Profile B11. Indicate elevation datu B12. Is the building located Designation Date:	☑ FIRM m used for BFE in a Coastal Barr	☐ Community Det	ermined [/D 1929	☐ Other/Sou ☑ NAVD 198	rce: 38		☐ Yes
	SECTIO	N C - BUILDING	ELEVATION IN	FORMATI	ON (SURVEY REQU	IRED)	
C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☐ Finished Construction *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO. Complete Items C2.a–h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS							
Datum used for building	elevations must	be the same as that	t used for the BFI	≣.	Chec	k the me	asurement used.
a) Top of bottom floor (ir b) Top of the next higher c) Bottom of the lowest I d) Attached garage (top	floor norizontal structu				<u>21.5</u>	⊠ feet ☐ feet ☐ feet ☑ feet	meters meters
e) Lowest elevation of m (Describe type of equi			building		<u>21.5</u>	⊠ feet	meters
 f) Lowest adjacent (finis g) Highest adjacent (finis h) Lowest adjacent grade 					12.0	⊠ feet ⊠ feet	☐ meters ☐ meters
.,			s, including struct	ural support	<u>13.0</u>	feet	meters
	e at lowest eleva	tion of deck or stairs			ITECT CERTIFICATI	☐ feet	
This certification is to be sig information. I certify that the I understand that any false s Check here if comment Check here if attachme	SECTIOned and sealed to information on the statement may be a re provided of	tion of deck or stairs ND - SURVEYO oy a land surveyor, ohis Certificate represe punishable by fine	R, ENGINEER engineer, or archi sents my best effi or imprisonment	OR ARCH tect authorize orts to interprunder 18 U.S ad longitude in	ITECT CERTIFICATION TO THE CONTROL OF T	ON ation	meters RANDON PROFESS C
This certification is to be signiformation. I certify that the I understand that any false so Check here if comment	SECTIOned and sealed to information on to tatement may be a re provided onts.	tion of deck or stairs ND - SURVEYO oy a land surveyor, ohis Certificate represe punishable by fine	PR, ENGINEER engineer, or archi sents my best effi or imprisonment Were latitude ar licensed land su	OR ARCH tect authorize orts to interprunder 18 U.S ad longitude in	ed by law to certify elevate the data available. S. Code, Section 1001. In Section A provided by Yes No	ON ation	meters ANDON PROFESSICO
This certification is to be sig information. I certify that the I understand that any false s Check here if comment Check here if attachme Certifier's Name John Brand Title	SECTIOned and sealed to information on the statement may be a re provided onts.	tion of deck or stairs N D - SURVEYO Doy a land surveyor, of this Certificate representation of the punishable by fine on back of form. Company Name	PR, ENGINEER engineer, or archi sents my best effi or imprisonment Were latitude ar licensed land su	OR ARCH tect authorize orts to interpr under 18 U.S ad longitude in rveyor?	ed by law to certify elevate the data available. S. Code, Section 1001. In Section A provided by Yes No Deer 3225	ON ation	meters RANDON PROFESS CO
This certification is to be sig information. I certify that the I understand that any false s Check here if comment Check here if attachme	SECTIOned and sealed to information on the statement may be a re provided onts.	tion of deck or stairs ND - SURVEYO Doy a land surveyor, a this Certificate represe punishable by fine n back of form.	PR, ENGINEER engineer, or archi sents my best effi- or imprisonment Were latitude ar licensed land su	OR ARCH tect authorize orts to interpr under 18 U.S ad longitude in rveyor? License Num	ed by law to certify elevate the data available. S. Code, Section 1001. In Section A provided by Yes No	ON ation	meters RANDON PROFESS CO

ELEVATION CERTIFICATE, pa				
	opy the corresponding information from	DOMESTIC STATE OF THE PARTY OF		INSURANCE COMPANY USE
142 Vacation Lane	., Unit, Suite, and/or Bldg. No.) or P.O. Route and			Number:
City Waveland	State MS	ZIP Code 39	576 Comp	pany NAIC Number:
SECTION	D - SURVEYOR, ENGINEER, OR ARCHI	FECT CERT	IFICATION (CONTI	NUED)
Copy both sides of this Elevation Certi	ficate for (1) community official, (2) insurance age	nt/company,	and (3) building owner.	
Comments NOTE: Benchmark set: F	PK Nail set @ edge of road at front center of lot. I	Elevation = 12	2.75'	
Signature	Date	05-31-14		
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT R	EQUIRED)	FOR ZONE AO AND	ZONE A (WITHOUT BFE)
and C. For Items E1–E4, use natural g E1. Provide elevation information for grade (HAG) and the lowest adjate a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6–9 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth ordinance? SECTION The property owner or owner's authoric	basement, crawlspace, or enclosure) isbasement, crawlspace, or enclosure) ispermanent flood openings provided in Section A of the building is feet meters above d/or equipment servicing the building is number is available, is the top of the bottom floor Unknown. The local official must certify this info F - PROPERTY OWNER (OR OWNER'S zed representative who completes Sections A, B, ments in Sections A, B, and E are correct to the best in	In Puerto Ricishow whether	er the elevation is above eet meters above eet meters above eet meters above or 9 (see pages 8–9 of Ir ve or below the HAI ve the HAG. above occordance with the connection G. TATIVE) CERTIFICATE THE A (without a FEMA-is	e or below the highest adjacent ve or below the HAG. ve or below the LAG. instructions), the next higher floor G. or below the HAG. inmunity's floodplain management
editiones des respectives commentes estadores de Commentes de Serviciones de la commente de la commente de Ser Commentes de la commente de la comm	SECTION G - COMMUNITY INFOR	MATION (O	PTIONAL)	
of this Elevation Certificate. Complete the G1. The information in Section C v is authorized by law to certify G2. A community official complete	or ordinance to administer the community's floods eapplicable item(s) and sign below. Check the mea was taken from other documentation that has bee elevation information. (Indicate the source and d d Section E for a building located in Zone A (with this G4—G10) is provided for community floodplain	surement use n signed and ate of the elev out a FEMA-i	d in Items G8–G10. In F sealed by a licensed su ration data in the Comn ssued or community-iss	Puerto Rico only, enter meters. Irveyor, engineer, or architect who nents area below.)
G4. Permit Number	G5. Date Permit Issued	G6. Date	Certificate Of Complian	ce/Occupancy Issued
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (ir G9. BFE or (in Zone AO) depth of flood G10. Community's design flood elevatio Local Official's Name Community Name	ding at the building site:n: Titl	feet feet feet feet feet	meters Date	um um
Signature	Da			
Comments				Check here if attachments



NON-CONVERSION AGREEMENT with



CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 29th day of August 20 8,2018 at pages 10753 - 10753 By Mike & Madeline Harper (OWNER) having an address at 112 Was of February
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at 142 Vacation In. In the City of Waveland, MS, in the County of Hancock, designated in the Tax Records as 162 J - 0 - 10 - 013.000. WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of Waveland Floodplain Management Ordinance of Number 342 and under Permit Number 1800051.
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions an restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
1. The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is ZO+ feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:
In witness whereof the undersigned set their hands and seals this
Made ine Harper (Print) Timothy A. Kellar Chancery Clerk By: Medic DC
(Signature) (Signature)

My Commission Expires Dec. 31, 2019

WITNESS

OWNER